

L1800017Z309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

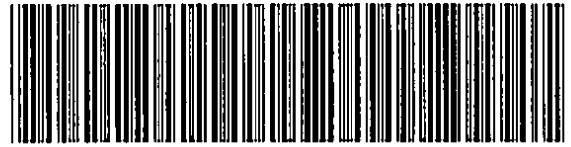
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 22 2021

S. YOUNG

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END

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WILBANKS, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew O. Wilbanks

Name of Person

Wilbanks, LLC

Firm/Company

4043 Gadsden Road

Address

Jacksonville, Florida 32207

City/State and Zip Code

mowilbanks@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew O Wilbanks	904	504-3272
_____	at (_____) _____	
Name of Person	Area Code	Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: WILBANKS, LLC

SECOND: The Florida Document Number of the limited liability company is: 83-1337644

THIRD: The street address of the limited liability company's principal office is:

4043 Gadsden Road

Jacksonville, Florida 32207

The mailing address of the limited liability company's principal office is:

4043 Gadsden Road

Jacksonville, Florida 32207

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

John F Wilbanks

- a. Granted to: _____

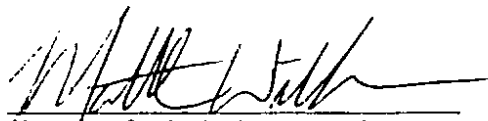
- b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

John F Wilbanks

- a. Granted to: _____

- b. No authority granted to: _____


Signature of authorized representative

Matthew Wilbanks
Typed or printed name of signature

Filing Fee: **\$25.00**

Certified Copy: **\$30.00 (optional)**